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TO: EXAMINER MEDINA IBRAHIM  
FROM: VIRGINIA DRESS  
RE: U.S. PATENT APPLICATION SERIAL NO. 09/538,396  
ATTORNEY DOCKET NO. 1116E  
DATE: 11/26/03 FAX NUMBER: (703) 872-9307  
NUMBER OF PAGES FOLLOWING THIS SHEET: 63

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/538,396	
	Filing Date	03/29/2000	
	First Named Inventor	Pramod B. Mahajan	
	Art Unit	1638	
	Examiner Name	Ibrahim, Medina Ahmed	
Total Number of Pages in This Submission	62	Attorney Docket Number	1116E

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Appendix C Appendix D
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
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Signature	<i>Virginia M. Dress</i>
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